

CLAIMS ONLY							Application Number <div style="text-align: center; font-family: cursive;">10/070,241</div>		Filing Date		
							Applicant(s)				
<i>6-17-89</i>							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		
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Total Claims	14		14				Total Claims				